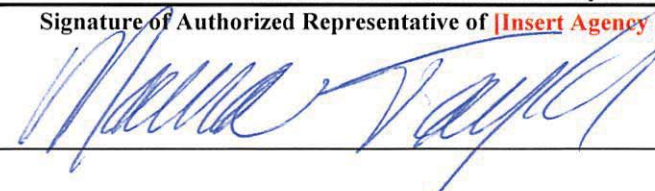



Missouri Office of Administration

FFY17 A2A Quarterly Expenditure Report

| | |
|---|---|
| Catholic Charities of Southern Missouri | CS170042002 |
| <i>Program Year July 1, 2016 - September 30, 2017</i> | |
| Revenue | Federal (TANF) |
| Revenue Request | \$ 70,010.22 |
| Indirect Administrative Costs Calculations | |
| Option 1: Federally Negotiated Indirect Cost Rate (FNICR) | |
| Application Base: | \$ - |
| Federally Negotiated Indirect Cost Rate (FNICR): % | 0.00% |
| Total Indirect Administrative Costs | \$ - |
| OR | |
| Option 2: 10% De Minimus (use if no FNICR) | |
| Application Base: Modified Total Direct Administrative Cost | \$ 56,222.75 |
| | 10% |
| Total Indirect Administrative Costs | \$ 5,622.28 |
| Direct Administrative Costs | Federal (TANF) |
| Program Salaries and Wages | \$ 34,736.73 |
| Employee Benefits | \$ 14,735.06 |
| Employee Travel | \$ 977.85 |
| Employee Training | \$ - |
| Office Rent/Space | \$ 300.00 |
| Office Utilities | \$ 21.21 |
| Facility Insurance | \$ 1,180.02 |
| Office Supplies (under \$5,000) | \$ 333.15 |
| Equipment (Capitol Equipment over \$5,000 threshold) | \$ - |
| Office Communications | \$ 450.88 |
| Office Repairs and Maintenance | \$ - |
| Contract/Consulting | \$ 3,487.85 |
| Other (list): | \$ - |
| (add other categories as needed) | \$ - |
| Total Direct Administrative Cost | \$ 56,222.75 |
| Less: | |
| Equipment (Capital Equipment over the \$5,000 threshold) | 0 |
| Contracting/Consulting (amount of each contract service over \$25,000) | 0 |
| Other based on definition | 0 |
| Modified Total Direct Administrative Cost | \$ 56,222.75 |
| Participant Services | Federal (TANF) |
| Transportation | \$ - |
| Job Training | \$ - |
| Tuition Assistance | \$ - |
| Contracted Residential Care | \$ - |
| Utility Assistance | \$ 2,331.82 |
| Emergency Shelter | \$ - |
| Housing Assistance | \$ 3,425.00 |
| Residential Care Services (LifeHouse Crisis Maternity Home) | \$ 2,408.37 |
| Total Participant Costs | \$ 8,165.19 |
| <p><i>I hereby certify that the budget is taken from the original Books of Account and that budget amounts are valid and consistent with the terms of the contract.</i></p> | |
| Signature of Authorized Representative of [Insert Agency Name]  | Date  |